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22434 7590 09/26/2005

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Susan W. Xu	(Depositor's name)
<i>Su Xu</i>	(Signature)
November 30, 2005	(Date)

12/02/2005 MGBREM2 00000008 10052304

01 FC:1501 1400.00 OP
 02 FC:1504 300.00 OP
 03 FC:8001 9.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/052,304	01/17/2002	Masood Seyed Mortazavi	SUN1P849/P7352	8384

TITLE OF INVENTION: ONLINE UPGRADE OF CONTAINER-BASED SOFTWARE COMPONENTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	12/27/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
KHATRI, ANIL	2193	717-168000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Beyer Weaver & Thomas, LLP

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Sun Microsystems, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Santa Clara, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 03

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- ☒ A check in the amount of the fee(s) is enclosed.
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☒ The Director is hereby authorized by charge ~~the required fee(s)~~ any deficiencies, or credit any overpayment, to Deposit Account Number 50-0388 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

R. Mahboubian

Date November 30, 2005

Registration No. 44,890

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